

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730568

Entity Name: KALEIDOSCOPE THEATRE, INCORPORATED

Current Principal Place of Business:

207 E. 24TH ST.
LYNN HAVEN, FL 32444

Current Mailing Address:

P.O. BOX 526
LYNN HAVEN, FL 32444

FEI Number: 51-0192637

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, SANDRA D
3002 WEST 21ST COURT
PANAMA CITY, FL 32405 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name HERTZOG, BARRY
Address 1608 FAIRY AVENUE
City-State-Zip: PANAMA CITY FL 32405

Title VP
Name EILAND-HALL, ISAAC
Address 914 BRANDEIS AVE.
City-State-Zip: PANAMA CITY FL 32405

Title S
Name MAULDEN, NICOLE
Address 102 HARBOUR POINTE DRIVE
City-State-Zip: LYNN HAVEN FL 32444

Title T
Name WILSON, SANDRA D
Address 3002 W. 21ST COURT
City-State-Zip: PANAMA CITY FL 32405

Title D
Name BOWMAN, SCOTT
Address 2705 WOODMERE DRIVE
City-State-Zip: PANAMA CITY FL 32405

Title D
Name HAWK, LINDA
Address 4502 VISTA LANE
City-State-Zip: LYNN HAVEN FL 32444

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SANDRA D. WILSON

TREASURER

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date